Plucocojaagg

	(Requestor's Name)			
	(Address)			
	(Address)			
	(City/State/Zip/Phone #)			
	P WAIT	MAIL.		
	(Business Entity Name)			
	(Document Number)			
Certified Copies	Certificates of s	Status		
Special Instructions to Filing Officer:				
		<u> </u>		

Office Use Only

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4/12/16

COVER LETTER

TO: Charter Section			
Division of Co	•		
SUBJECT: Hyalta Aer	onautics, inc.		
	Name of	Resulting Florida Profit	Corporation
	te of Conversion, Article Profit Corporation" in ac		ees are submitted to convert an "Other Business 15, F.S.
Please return all corres	pondence concerning this	s matter to:	
Anton Hopen			
•	Contact Person		
Smith Hopen PA			
	Firm/Company		
180 Pine Avenue North			
	Address		
Oldsmar, FL 34677			
	City, State and Zip Cod	e	
anton.hopen@smithhope	en.com		
E-mail address: (to be used for future annu	ual report notification)	
For further information	concerning this matter,	please call:	
Anton Hopen		at (813)925-8	3505
Name of C	ontact Person	_ \	d Daytime Telephone Number
Enclosed is a check for	the following amount:		
■ \$105.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filing Fees and Certified Copy	☐\$122.50 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS:			LING ADDRESS:
New Filings Section Division of Corporatio	ns		Filings Section on of Corporations

New Filings Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

New Filings Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Division of Corporations

FILED

16 APR II PH 1:58

March 30, 2016

ANTON HOPEN 180 PINE AVENUE NORTH OLDSMAR, FL 34677

SUBJECT: HYALTA AERONAUTICS, INC.

Ref. Number: W16000023487

We have received your document for HYALTA AERONAUTICS, INC. and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

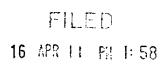
If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 516A00006512

TE APR II PN 3-21

Certificate of Conversion For "Other Business Entity" Into Florida Profit Corporation



This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
HYALTA AERONAUTICS, LLC
Enter Name of Other Business Entity L 15000 127751
2. The "Other Business Entity" is a Limited Liability Company
(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of Florida
(Enter state, or if a non-U.S. entity, the name of the country)
07/27/2015 on .
Enter date "Other Business Entity" was first organized, formed or incorporated
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>
Hyalta Aeronautics, Inc.
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florid Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation if an effective date is listed therein.)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be
listed as the document's effective date on the Department of State's records.

Signed this 23 day of February		
Required Signature for Florida Profit Corporation	<u>1:</u> / /	
Signature of Chairman Vice Chairman, Director, Offi Incorporator: Printed Name: Scott Kampshall Title CEO	icer, of if Directors or Officers have not bee	n selected, an
Required Signature(s) on penalt of Other Business	Entity: See below for required signature(s	3).]
Signature: Jet Capa	h	-
Printed Name: Scott Kempshall	Title: Manager	
Signature:		-
Printed Name:	Title:	-
Signature:		
Printed Name:	Title:	
Signature:		-
Printed Name:	Title:	-
Signature:		-
Printed Name:	Title:	-
Signature:		-
Printed Name:	Title:	-
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:	W ₁ S
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.		
All others: Signature of an authorized person.		7 0
Fees: Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional) Page 2 of 2	FILED ARR II RH II 58

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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ARTICLE I	NAME Corporation shall be:	s, Inc.			16	APR	11	PH	1: 58
The name of the	corporation shall be:					11.5	<u> </u>		115
	PRINCIPAL OFFICE				1		÷÷.,		
The principal pla	ce of business/mailing address is:								
1191 DARLINGO	Principal street address ON OAK DR. NE		Mail	ing address	s, if differ	ent is:			_
SAINT PETERSE	BURG, FL 33703	_	<u> </u>			 .	_		-
ARTICLE III The purpose for Any and all lawfu	which the corporation is organized is:	_ :							-
- Trify and all lawla	it outsiness.								
	-								
									_
ARTICLE IV	SHARES 1000								
The number of sh	nares of stock is:								
ARTICLE V	INITIAL OFFICERS AND/OR L	DIRECTORS							
Name and Title:	Scott Kempshall, CEO	Name and	l Title:						
Address:	1191 DARLINGON OAK DR. NE	Address:							
S	SAINT PETERSBURG, FL 33703								_
Name and Title:		—- Name and	Title:						
Address:									
Addiess, _		Audiess.							
Name and Title:			Title:						-
Address:	100000								

The name	and Florida street address (P.O. Box NOT acceptable	le) of the registered agent is:	
Name:	Anton Hopen		
Address:	180 Pine Avenue North		
	Oldsmar, FL 34677		
ARTICL			
The <u>name</u>	and address of the Incorporator is:		
Name:	Anton Hopen		
Address:	180 Pine Avenue North		
	Oldsmar, FL 34677		
	**************************************		signated in
this certifi	icate, I am familiar with and accept the appointment of	is registered agent and agree to act in this capacity	
	Sata Home	Feb. 23, 2016	
	Required Signature/Registered Agent	Date	
	his document and affirm that the facts stated herein to the Department of State constitutes a third degree		mitted in a
	Suts Hopen	Feb. 23, 2016	
	Required Signature/Incorporator	Date	

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